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CONFIRMATION NO. 4556

SERIAL NUMBER 10/786,339 ✓	FILING OR 371(c) DATE ✓ 02/25/2004 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. TRANSVI.017A
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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **
05/18/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 71	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Paula L. King</i> Examiner's Signature Initials				

ADDRESS

20995

TITLE

Structurally optimized hollow fiber membranes

FILING FEE RECEIVED 1345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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